

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Number : 09/938,668 Confirmation No.: 2506
Applicant : Jens PETERSEN
Filed : August 27, 2001
Title : POLYACRYLAMIDE HYDROGEL FOR ARTHRITIS
TC/Art Unit : 1615
Examiner: Carlos A. Azpuru

Docket No. : 60117.000005
Customer No. : 21967

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ISSUE FEE AND PUBLICATION FEE PAYMENT TRANSMITTAL

Sir:

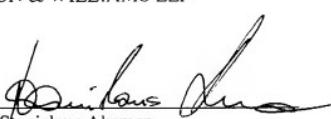
In accordance with the Notice of Allowance and Issue Fee Due mailed April 27, 2006, applicant is submitting herewith the Issue Fee Transmittal (Part B) in the above-captioned application.

Please charge Deposit Account No. 50-0206 in the amount of \$1,700.00 to cover the Issue Fee and Publication Fee. In the event any variance exists between the amount enclosed and the Patent Office charges, please charge or credit any difference to the undersigned's Deposit Account No. 50-0206.

Respectfully submitted,

HUNTON & WILLIAMS LLP

Dated: July 27, 2006

By: 
Stanislaus Aksman
Registration No. 28,562

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PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
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7590 04/27/2006

Stanislaus Aksman
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(Depositor's name)

(Signature)

(Date)

APPLICATION NO	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/938,668	08/27/2001	Jens Petersen	60117.000005	2506

TITLE OF INVENTION: POLYACRYLAMIDE HYDROGEL FOR ARTHRITIS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	07/27/2006
EXAMINER		ART UNIT	CLASS-SUBCLASS		
AZPURU, CARLOS A		1615	424-427000		

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363)	2. For printing on the patent front page: (i) the names of up to 3 registered patent attorneys or agents OR, alternatively,	1. <u>Hunton & Williams LLP</u>
<input type="checkbox"/> Change of correspondence address (or Change of Correspondence Address form PTO/SB/122 attached)	(ii) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed	2. _____
<input type="checkbox"/> "Fee Address" indication (or "Fee Address" indication form PTO/SB/47, Rev. 03/02, or more recent) attached. Use of a Customer Number is required.	3. _____	3. _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

Contura SA

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Montreux, Switzerland

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies _____

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5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above. NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant, a registered attorney or agent, or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature Stanislaus Aksman
 Typed or printed name Stanislaus Aksman

Date July 27, 2006
 Registration No. 28,562

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